Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

_												
		CLAIMS A		S FILED - PART (Column 1)		(Column 2)		SMALL:	ENTITY	OR		R THAN ENTITY
TOTAL CLAIMS			41				]	RATE	FEE	<b>¬</b> Ö''		
FOR			NUMBER FILED		NUM	BER EXTRA		BASIC FE		OR	RATE BASIC FE	FEE F 770.00
TOTAL CHARGEABLE CLAIMS					* 2/			X\$ 9=	189	OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 = *			, ,		X43=	1/3	OR	V00	
М	ULTIPLE DEPE	ENDENT CLAIM F	PRESENT					+145=				
*	f the differenc	e in column 1 is	less than	less than zero, enter "0" in				TOTAL	574	OR OR	TOTAL	
	. (			977	<b>_</b>							
	1	(Column 1)	MENDED - PART II  (Column 2) (Column 3) HIGHEST			(Column 3)		SMALL	ENTITY	OR		R THAN ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ON.	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
Σ	Independent	* ENTATION OF MI	Minus	***	CL AUA	=		X43=		OR	X86=	
	1	ENTITION OF WI	/		CLAIM			+145=		OR	+290=	
			(	1 -		:	Δ.	TOTAL DDIT. FEE		OR ,	TOTAL	
		(Column 1)		(Colum	n 2)	(Column 3)	. ^	DDII. FEE	52 c	<b>.</b>	ADDIT. FEE	
MENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* ENTATION OF MU	Minus	***		=		X43=	í	OR	X86=	
	THOTTHESE	INTATION OF MIC	LIPLE DEI	PENDENT	JLAIM			+145=		OR	+290=	
							AD	TOTAL DIT. FEE		OR A	TOTAL DDIT, FEE	
		(Column 1)		(Columr		(Column 3)						
ן ב		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** =		=		X\$ 9=		OR	X\$18=	156
;	Independent		Minus	***		=	<b>+</b>	X43=				
	FIRST PRESE	RST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						^43= ————————————————————————————————————		OR	X86=	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
" II "** {	the "Highest Nun the "Highest Nur	nber Previously Paid mber Previously Paid ber Previously Paid	d For" IN THIS d For" IN THIS	S SPACE is le	ess than	20, enter "20."		TOTAL DIT. FEE in the appr			TOTAL DDIT. FEE	